

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000049852

FILED
Apr 29, 2007
Secretary of State

Entity Name: PROMAX CONSULTING SERVICES, INC.

Current Principal Place of Business:

1103 HIBISCUS BLVD.
SUITE 302A
W. MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

1103 HIBISCUS BLVD.
SUITE 302A
W. MELBOURNE, FL 32901

New Mailing Address:

955 CROTON ROAD
MELBOURNE, FL 32935

FEI Number: 59-3580034

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICKER, ROBERT E
1901 S. HARBOR CITY BLVD.
STE 600
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

RICKER, ROBERT E
955 CROTON ROAD
MELBOURNE, FL 32935 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROBERT RICKER

04/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CDPT () Delete
Name: RICKER, ROBERT E
Address: 1901 S. HARBOR CITY BLVD. STE 600
City-St-Zip: MELBOURNE, FL 32901

Title: DS () Delete
Name: RICKER, DONNA M
Address: 1901 S. HARBOR CITY BLVD. STE 600
City-St-Zip: MELBOURNE, FL 32901

Title: D () Delete
Name: RICKER, ROB E
Address: 1901 S. HARBOR CITY BLVD. STE 600
City-St-Zip: MELBOURNE, FL 32901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT RICKER

CDPT

04/29/2007

Electronic Signature of Signing Officer or Director

Date